

**OBESITY HEALTH INSURANCE COVERAGE**

2008 GENERAL SESSION

STATE OF UTAH

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**LONG TITLE****General Description:**

This bill amends the Insurance Code to require certain health insurers to offer morbid obesity coverage.

**Highlighted Provisions:**

This bill:

- defines terms;
- beginning January 1, 2008, requires certain health insurers to offer morbid obesity coverage;
- does not require employers or individuals to purchase morbid obesity coverage;
- establishes certain eligibility criteria for morbid obesity coverage; and
- grants rulemaking authority to the Insurance Commissioner to establish standards for morbid obesity coverage.

**Monies Appropriated in this Bill:**

None

**Other Special Clauses:**

None

**Utah Code Sections Affected:**

ENACTS:

**31A-22-635**, Utah Code Annotated 1953

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*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section **31A-22-635** is enacted to read:

**31A-22-635. Coverage For Treatment of Morbid Obesity.**

(1) As used in this section:

(a) "Body mass index" or "BMI" means a practical marker that is used to assess the degree of obesity and is calculated by dividing the weight in kilograms by the height in meters squared.

(b) "Carrier" means an insurer who is subject to:

(i) Chapter 8, Health Maintenance Organizations and Limited Health Plans;

(ii) Chapter 22, Part 6, Accident and Health Insurance;

(iii) Chapter 30, Individual, Small Employer, and Group Health Insurance Act; and

(iv) notwithstanding Section 31A-1-103, Title 49, Chapter 20, Public Employees'

Benefit and Insurance Program.

(c) "Morbid obesity coverage" means coverage in a health insurance policy or health maintenance organization contract that is equitable to or identical to coverage provided for the treatment of other illness or diseases as required by:

(i) administrative rule adopted by the commissioner in accordance with Subsection (4);

and

(ii) the patient eligibility criteria established in Subsection (3).

(2) (a) Beginning with policies issued after or renewed after December 31, 2008, a carrier shall offer at least one health insurance plan or contract that provides morbid obesity coverage in accordance with this section.

(b) Copayments, deductibles, coinsurance and premiums for morbid obesity coverage:

(i) must be actuarially based;

(ii) must be submitted to the insurance commissioner; and

(iii) must comply with administrative rules adopted by the commissioner under the provisions of Subsection (4)(b).

(c) An employer is not mandated to purchase a policy that includes morbid obesity coverage.

(d) An individual purchasing individual coverage is not mandated to purchase a policy that includes morbid obesity coverage.

(3) (a) The offering of morbid obesity coverage required by Subsection (2) shall include the eligibility requirements described in this Subsection (3).

(b) To be eligible for morbid obesity coverage, an enrollee must:

(i) be 18 years of age or older;

(ii) have obtained a complete physical examination and medical history from a health care professional licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Chapter 68, Utah Osteopathic Medical Practice Act;

64 (iii) be diagnosed by the health care professional:

65 (A) as having a BMI of 35 or greater; and

66 (B) as having either:

67 (I) one of the following diagnoses:

68 (Aa) obesity hypoventilation syndrome, including Alveolar hypoventilation or  
69 insufficient ventilation leading to an increase PaCO<sub>2</sub> above normal;

70 (Bb) uncontrolled hypertension with blood pressure of 140/90 or greater; or

71 (Cc) uncontrolled diabetes with AiC of 7 or greater; or

72 (II) any two of the following diagnoses:

73 (Aa) hypertension;

74 (Bb) dyslipidemia;

75 (Cc) Type II Diabetes;

76 (Dd) coronary heart disease; or

77 (Ee) obstructive sleep apnea; and

78 (iv) receive a recommendation from the health care professional to be treated for  
79 morbid obesity.

80 (c) An enrollee is not eligible for morbid obesity coverage if the enrollee has a  
81 systemic dysfunction, malignant disease, drug addiction or some other condition that could:

82 (i) limit a successful clinical outcome for the morbid obesity treatment; or

83 (ii) interfere with the medical management required for the morbid obesity treatment.

84 (4) (a) The commissioner shall, before July 1, 2008, adopt administrative rules in  
85 accordance with Title 63, Chapter 46a, Utah Administrative Rulemaking Act, which establish  
86 minimum standards of coverage for morbid obesity.

87 (b) The rules required by Subsection (4)(a) shall:

88 (i) be in accordance with this section; and

89 (ii) designate durational limits, amount limits, deductibles and coinsurance for the  
90 treatment of morbid obesity that are equitable to or identical to coverage provided for the  
91 treatment of other illness or disease.